

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | AS | 69867 | 9/28 |
| O.I.P.E. CLASSIFIER | | 21 | 10/7/00 |
| FORMALITY REVIEW | AT | 832 | 10-30-00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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Best Available Copy